

**MONTANA DEPARTMENT OF TRANSPORTATION
RURAL TRANSIT ASSISTANCE PROGRAM
REQUEST FOR FUNDS**

Please fill out one form per person and please print

Your Agency _____ Address _____ Your Name _____ Your Position/Title _____ Reimburse to _____ If Individual - SSN# _____	Activity Attended _____ Dates _____ Location _____ If Agency - Federal ID # _____
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EXPENSE CATEGORY (See attached schedule of travel rates for reimbursement)

1) Registration fees or tuition.....	\$	
2) Accommodations \$_____/night x ____ nights.....	\$	
3) Meals <u>not covered by registration fees</u> :		

	Mon	Tue	Wed	Thur	Fri	Sat	Sun	Total
Breakfast								\$
Lunch								\$
Dinner								\$
Total Meals								\$

4) Travel

Airfare.....	\$	
Car - ____ Miles x .29 cents per mile.....	\$	
(Mileage is not reimbursed if your transit system is located 35 miles from the site of the approved program.)		
Taxi/Van to/from Airport.....	\$	
Total Travel	\$	
TOTAL EXPENSES	\$	

All receipts must be attached to this form in order to process reimbursement requests. Reimbursement requests must be submitted to Montana Department of Transportation, Transit Section, 2701 Prospect Ave., P.O. Box 201001, Helena, MT 59620-1001 no more than 30 days after the event attended. The Transit Section reserves the right to deny reimbursement requests submitted after the 30-day period. Please allow 30 days to process reimbursement requests.

CERTIFICATION

I certify that the expenses described in this request for funds form were incurred as part of the attendance and participation at the program identified above.

Applicants Signature: _____ Date: _____

FOR STATE USE ONLY:

This request is approved in the amount of \$ _____

MDT/Transit Section Authorized Signature: _____ Date: _____

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Schedule of Travel Rates

<u>In-State</u>	<u>Allowed Reimbursement Rate</u>
Meals and Lodging:	
Lodging (receipt required)	\$35.00 (plus tax)
Breakfast	\$5.00
Lunch	\$6.00
Dinner	\$12.00

Out-of-State

Meals and Lodging:

*Lodging (receipt required)	\$50.00 (plus tax)
Breakfast	\$6.00
Lunch	\$6.00
Dinner	\$16.00

*Lodging for high cost cities as determined by State travel policy is reimbursed at actual cost.

Travel

Air (coach class, receipt required. Reimbursement is limited to the lowest available travel fair.)

Car	\$0.29 per mile
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Other

Taxi Cab or Airport Van (business purposes only!)	Actual Cost (receipt required)
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Incidental costs such as telephone charges, in-room movies, etc., are considered personal and are not eligible for reimbursement.

RECEIPTS REQUIRED FOR AIRLINE TRAVEL, LODGING, AND TAXI TO AND FROM AIRPORT.

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*** Note: This evaluation is required! Reimbursement cannot be processed until Expense and Evaluation Forms are complete!**

Send to: Montana Department of Transportation, Transit Section
2701 Prospect Avenue
Helena, MT 59620-1001
Phone: (406) 444-6120